

Newsrack Permit Application

Department of Planning & Development Services 300 North Park Avenue, Sanford, Florida 32771 Phone: 407.688.5140 Fax: 407.688.5141

. Total number of pr	roposed newsracks in City		
Number of propos	sed newsracks in the historic	downtown area:	
	r location of all proposed new sheets and/or map if necessa	vsracks in the City, excluding the histo ary)	ric downtown area:
	or location of all proposed new sheets and/or map if necess	wsracks in the historic downtown area: ary)	:
the City.	•		he installation of any newsrack in
the City. I have review	•	wsrack Code and agree to the Term	•
the City. I have review	wed the City of Sanford Nev	wsrack Code and agree to the Term	s and Conditions therein.
the City. I have review	wed the City of Sanford Nev	wsrack Code and agree to the Term	s and Conditions therein.
the City. I have review Signature:	wed the City of Sanford Nev	wsrack Code and agree to the Term	s and Conditions therein.
I have review Signature: This application is s Applicant/Agent:	wed the City of Sanford Nev	wsrack Code and agree to the Term Date:	s and Conditions therein.
I have review Signature: This application is s Applicant/Agent:	wed the City of Sanford Nev	wsrack Code and agree to the Term Date:	s and Conditions therein.
I have review Signature: This application is sometimes applicant/Agent: Signature: Address:	wed the City of Sanford Nev	wsrack Code and agree to the Term Date: Print Name:	s and Conditions therein.
I have review Signature: This application is s Applicant/Agent: Signature: Address: Phone:	wed the City of Sanford New submitted by: Fax:	wsrack Code and agree to the Term Date: Print Name:	s and Conditions therein.
I have review Signature: This application is so Applicant/Agent: Signature: Address: Phone: Property Owner:	submitted by: Fax: Note: applicant a	wsrack Code and agree to the Term Date: Print Name: Email: authorization form must be completed	s and Conditions therein. Date:
I have review Signature: This application is s Applicant/Agent: Signature: Address: Phone: Property Owner: Signature:	submitted by: Fax: Note: applicant a	wsrack Code and agree to the Term Date: Print Name: Email: authorization form must be completed. Print Name:	s and Conditions therein. Date:
I have review Signature: This application is so applicant/Agent: Signature: Address: Phone: Property Owner: Signature: Address: Address:	submitted by: Fax: Note: applicant a	wsrack Code and agree to the Term Date: Print Name: Email: authorization form must be completed Print Name:	s and Conditions therein. Date:
I have review Signature: This application is so applicant/Agent: Signature: Address: Phone: Property Owner: Signature: Address: Address:	submitted by: Fax: Note: applicant a	wsrack Code and agree to the Term Date: Print Name: Email: authorization form must be completed the print Name:	s and Conditions therein. Date:
I have review Signature: This application is so applicant/Agent: Signature: Address: Phone: Property Owner: Signature: Address: Address:	submitted by: Fax:	wsrack Code and agree to the Term Date: Print Name: Email: authorization form must be completed Print Name: Email: Email: Official Use Only	s and Conditions therein. Date:
I have review Signature: This application is so applicant/Agent: Signature: Address: Phone: Property Owner: Signature: Address: Phone:	submitted by: Fax: Note: applicant a	wsrack Code and agree to the Term Date: Print Name: Email: authorization form must be completed Print Name: Email: Email:	s and Conditions therein. Date: Date: Date:
I have review Signature: This application is so Applicant/Agent: Signature: Address: Phone: Address: Address: Phone: Approv	submitted by: Fax: Note: applicant a	Print Name: Email: Print Name: Email: Print Name: Email: Print Name: Print Name: Email: Email: Email:	s and Conditions therein. Date: Date: Date:

January 2015 Newsrack Permit.pdf